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PTO/SB/22 (09-08)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 H.R. 4818.)</i>		Docket Number (Optional) 10437.0074.NPUS01																														
Application Number 10/708,422		Filed March 2, 2004																														
For Control Method for Process of Removing Permanganate Reducing Compounds From Methanol Carbonylation Process																																
Art Unit 1625		Examiner Taylor V. Oh																														
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 40%;"></th> <th style="text-align: center; width: 15%;"><u>Fee</u></th> <th style="text-align: center; width: 15%;"><u>Small Entity Fee</u></th> <th style="text-align: center; width: 15%;"></th> <th style="text-align: center; width: 15%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month(37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: center;">\$</td> <td style="text-align: center;"><u>120.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$450</td> <td style="text-align: center;">\$225</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1020</td> <td style="text-align: center;">\$510</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> Four months(37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1590</td> <td style="text-align: center;">\$795</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2160</td> <td style="text-align: center;">\$1080</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">_____</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-3038/10437.0074.NPUS01</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>58,750</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p> <p> Signature Rachel E. Greene Typed or printed name</p> <p style="text-align: right;">March 1, 2007 Date (713) 787-1595 Telephone Number</p>				<u>Fee</u>	<u>Small Entity Fee</u>			<input checked="" type="checkbox"/> One month(37 CFR 1.17(a)(1))	\$120	\$60	\$	<u>120.00</u>	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	_____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	_____	<input type="checkbox"/> Four months(37 CFR 1.17(a)(4))	\$1590	\$795	\$	_____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	_____
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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